Fill in this information	to identify your case:	
Debtor 1	Choon H. Kwon	
Debtor 2 (Spouse, if filing)	Chong U Kwon	
United States Bankru	ptcy Court for the: SOUTHERN DISTRICT OF OHIO	
	13-bk-60091	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

3/21/16 3:49PM

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	· · ·	☐ Not employed	☐ Not employed
	employers.	Occupation	Warehouse Order Selector	Machine Operator
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.		Employer's name	The Kroger Co.	Embroidery Design Group, LLC
		Employer's address	1014 Vine St. Cincinnati, OH 45202	2564 Billingsley Rd. Columbus, OH 43235
		How long employed the	here? 3.5 years	9 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,471.82 1,878.50 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,471.82 1,878.50

Schedule I: Your Income Official Form 106I page 1

Debte Debte		Choon H. Kwon Chong U Kwon		Cas	se number (<i>if known</i>)	2:13-bk-6	0091	
				F	or Debtor 1	For Debte		
	Cop	by line 4 here	4.	\$	3,471.82		1,878.50	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	614.51	\$	309.95	
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		208.31	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$	0.00	
	5e.	Insurance	5e.	\$	88.13	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	. \$	0.00	\$	0.00	
	5h.	Other deductions. Specify: HSA	5h.	+ \$	80.00	+ \$	0.00	
		Dep Grp Life		\$	8.19	\$	0.00	
		Excess Life		\$	5.16	\$	0.00	
		PAI 11		\$	0.74	\$	0.00	
		Vol. Life		\$	15.95	\$	0.00	
		Dental		\$	27.43	\$	0.00	
		Vision		\$	19.80	\$	0.00	
		Catch up 401K		\$	34.67	\$	0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,102.89	\$	309.95	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,368.93	\$	1,568.55	
	8b. 8c. 8d. 8e. 8f.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00	
	8g.	Pension or retirement income	8g.	. \$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	0.00]
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2,368.93 + \$	1,568.5	5 = \$	3,937.48
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		2,300.33	1,300.3	-	3,337.40
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedular contributions from an unmarried partner, members of your household, your friends or relatives. Interpretation of the property o	our depe		•	sted in Sched	dule J. 	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The te that amount on the Summary of Schedules and Statistical Summary of Cellies					2. \$	3,937.48
							Combine	

Debtor 1 Choon H. Kwon Chong U Kwon

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain: NONE

Case number (# known)

2:13-bk-60091

Page 3 of 5

Filed 03/21/16

Document

Case 2:13-bk-60091 Doc 66

Entered 03/21/16 15:50:56

Desc Main
3/21/16 3:49PM

Case 2:13-bk-60091 Doc 66 Filed 03/21/16 Entered 03/21/16 15:50:56 Desc Main Document Page 4 of 5

Fill in this information to identify your case:		
	0	
Debtor 1 Choon H. Kwon	Check if this is:	
Debter 2	An amended filing	ntor
Debtor 2 (Spouse, if filing) Chong U Kwon	A supplement showing postpetition characteristic A supplement showing sh	pter
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	MM / DD / YYYY	
Case number (If known) 2:13-bk-60091		
Official Form 106J		
Schedule J: Your Expenses		12/1
Be as complete and accurate as possible. If two married people are filing together, both information. If more space is needed, attach another sheet to this form. On the top of an number (if known). Answer every question.		
Part 1: Describe Your Household 1. Is this a joint case?		
□ No. Go to line 2.		
Yes. Does Debtor 2 live in a separate household?		
■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Householder	old of Debtor 2.	
2. Do you have dependents? ■ No		
Do not list Debtor 1	ship to Dependent's Does dependent live with you?	
Do not state the	□ No	
dependents names.	Yes	
	□ No □ Yes	
	□ Yes	
	Yes	
3. Do your expenses include expenses of people other than vourself and your dependents? □ Yes	Yes □ No	
expenses of people other than yourself and your dependents?	Yes □ No	
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form	☐ Yes☐ No☐ Yes☐ No☐ Yes☐ Yes☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses	☐ Yes☐ No☐ Yes☐ No☐ Yes☐ Yes☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J,	☐ Yes☐ No☐ Yes☐ No☐ Yes☐ Yes☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i>	m as a supplement in a Chapter 13 case to reply, check the box at the top of the form and fill in	

4b. Property, homeowner's, or renter's insurance

Real estate taxes

4a.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 0.00 4b. \$ 15.00

4c. \$ 25.00 4d. \$ 0.00 5. \$ 0.00

Deb	tor 1	Choon H	l. Kwon			
Deb	tor 2	Chong U	Kwon	Case num	ber (if known)	2:13-bk-60091
•						
6.	Utilit 6a.		heat, natural gas	6a.	\$	276.94
	6b.	•	wer, garbage collection	6b.	\$	152.54
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	278.00
	6d.	Other. Spe		6d.	\$	0.00
7.			ekeeping supplies	— 7.	\$	540.00
8.			children's education costs	8.	\$	75.00
9.	_		ry, and dry cleaning	9.	\$	86.00
			products and services	10.	\$	50.00
11.			ntal expenses	11.	\$	200.00
			Include gas, maintenance, bus or train fare.		–	200.00
12.			ar payments.	12.	\$	200.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Char	ritable cont	ributions and religious donations	14.	\$	0.00
15.		rance.				
			surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.		29.00
		Health ins		15b.	·	0.00
		Vehicle ins		15c.	\$	140.00
			rance. Specify:	15d.	\$	0.00
16.	Taxe Spec		clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.			ease payments:			0.00
			ents for Vehicle 1	17a.	\$	0.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.	Your	r payments	of alimony, maintenance, and support that you did not report as			0.00
			your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Spec	,		19.		
20.			erty expenses not included in lines 4 or 5 of this form or on Sche	20a.		0.00
		Real estat	s on other property	20a. 20b.	•	0.00
				20b. 20c.		0.00
			nomeowner's, or renter's insurance ace, repair, and upkeep expenses	20d.	· -	0.00
			er's association or condominium dues	20d. 20e.	· -	0.00
24			er's association of condominatin dues		·	0.00
21.	Otne	er: Specify:		21.	+ ⊅	0.00
22.	Calc	ulate your r	monthly expenses			
	22a.	Add lines 4	through 21.		\$	3,367.48
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,367.48
22	Cala	ulata vaur r	monthly not income			
23.		-	monthly net income. 12 <i>(your combined monthly income)</i> from Schedule I.	23a.	¢	2.027.49
			monthly expenses from line 22c above.	23b.		3,937.48 3,367.48
	230.	Сору уош	monthly expenses from line 220 above.	230.	-φ	3,307.40
	23c.	,	our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	570.00
		100011	,,		1	
24.			an increase or decrease in your expenses within the year after you			
			u expect to finish paying for your car loan within the year or do you expect your m terms of your mortgage?	ortgage pa	yment to increas	se or decrease because of a
	■ N					
			Explain here:			
	_ '	 .	process and the second			